Form	88	
(July 20	JOO)	

## Notice of Section 527 Status

OMB No. 1545-1693

Intern	al Revenue Service				
Pa	rt I General Information				
1	Name of organization				Employer identification number
_	Jim Hahn Officeholder Accoun				95 4641156
2	Mailing address (P.O. Box or number 555 S. Flower Street, Suite 451		et, and room or suite r	iumber)	
<u>.</u>	City or town, state, and ZIP code	•		11 14	W
	Los Angeles, CA 90071				
3	E-mail address of organization				1 1/1
	dlgouldco@aol.com				
	Name of custodian of records			odian's address	
	- · · · - · · · -		555 S. Flower Street, Suite 4510		
	David L. Gould Company		Los	Angeles, CA 90071	
5a	Name of contact person		5b Conts	act person's address	
	Name of contact person			S. Flower Street, Suite 4510	
	Michelle Moore Sanders			Angeles, CA 90071	
				Aligeles, CA Stor I	
6	Business address of organization (if	differe	nt from mailing addres	s shown above). Number, street, and	room or suite number
	City or town, state, and ZIP code				
_					
	TI Purpose	4:			
7	Describe the purpose of the organiza	ation			
	Elect Candidate				
	·····				
					************
				***************************************	
Pai	t III List of All Related Ent	tities	(see instructions)		
	Name of related entity	8b	Relationship	8c Address	
			<u></u>		CEIVED
				555 S. Flower Street, Sult	NETVED TO
Hahn for Mayor		Affiliated			
				A -	121
				Los Angeles, CA 90071	1221
				Los Angeles, CA 90071	121
				Los Angeles, CA 90071	121
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			FB	Los Angeles, CA 90071	121
			72-7	Los Angeles, CA 90071	121

	cers, Directors, and Highl	y Compensated Employees (see instructions)
9a Name	9b Title	9c Address
0	_	555 S. Flower Street, Suite 4510
David L. Gould	Treasurer	Los Angeles, CA 90071
	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	
		***************************************
Under penalties of por Revenue Code, and th it is true, correct, and	at I have examined this notice, includi	amed in Part I is to be treated as an organization described in soliction 527 of the internation accompanying schedules and statements, and to the best of my know ledge and belie
		7. 3
Sign Signature of au	thorized official	Date